# SANTA ROSA COUNTY

# Santa Rosa County Local Mitigation Strategy Task Force

## **Initiatives List Proposal & Assessment Form**

Version 2005-9

This form nominates facilities or projects for consideration by the Santa Rosa County Local Mitigation Strategy (LMS) Task Force to be included in the Initiatives List of the LMS plan. Submitting this nomination in no way guarantees that the

Office Use Only Total Points:

project will be placed on the local LMS list, or if placed on the list and prioritized, that it will be submitted as part of one or more grant applications by any participating organization.

**Instructions:** For a project to be considered for inclusion on the LMS Initiatives List, the LMS Task Force's Steering Committee must provide final approval of an application. The proposed project must meet the following criteria and deadlines:

- **A.** It must <u>mitigate</u> something, such as actual and potential future damage from disasters. Mitigation is an effort to fix a facility or health and safety issue to reduce or eliminate future damages and/or injuries. Repairs or basic reconstruction to return a facility to previous conditions is not mitigation.
- **B.** If the proposed project is an individual home there must be documented <u>repetitive loss</u> and must be for either elevation & retrofit or acquisition & demolition.
- C. This <u>form must be submitted in a timely manner</u>. It must be completed and received by LMS support planning staff at least seven working days prior to the next called LMS meeting. This allows processing and scoring so that items can be considered in an efficient manner. LMS meeting times are posted at <a href="http://www.santarosa.fl.gov/lmsc/index.html">http://www.santarosa.fl.gov/lmsc/index.html</a> and normally occur once a quarter.

**Who should use this form?** Anyone can submit an initiatives proposal. However, if a facility is nominated by someone other than its owner, the proposing party should provide a written, signed letter with this form confirming knowledge of the nomination to the LMS Task Force.

One facility/function per form: A form can consider only one facility or critical function at a time. It is not designed to consider multiple facilities at once. Each facility needs to be considered by the LMS Task Force individually.

**Support planning staff to the LMS Task Force** compiles and maintains lists for the LMS plan. To receive a *digital copy* of this form, or to *ask questions* about completing this form, please contact:

- Sharon D. Marsh, 850-983-1848
- e-mail <u>sharonm@co.santa-rosa.fl.us</u>
- Santa Rosa County, 6495 Caroline St, Suite H, Milton, FL 32570
- Go to http://www.santarosa.fl.gov/lmsc/index.html

### I. General Information

Type or use your mouse in the gray boxes. Save the file under a new file name and preserve your master copy. Forward to the email or address above. Provide general information about the project below.

Α.	Nominating Party	: Provide informa	tion about you.		
	Today's Date: Name of Person Completing This Form: Title: Employer: Address:				
	City: Telephones:	State:	Zip:		
	Fax:	E-Mail:			
В.	<b>Project Information:</b> Provide details about this project:				
	Project Title (or nar Project Description Facility Owner (if a If private structure Elevation & Re Acquisition/den GPS Lat/Long (if a Physical Address (i	: a facility): is this for ( <i>check ap</i> trofit nolition geographic locati			
	What sector owns t Non Profit Private County Municipal State Federal Special District	• `	ne)?		
C.	<b>Project Type:</b> (Ch	neck only one primary	and one secondary categorical description.)		
	Hardening/F Publ Privi Criti Shelter (at r.	ic ate residence ( <i>inste</i> cal health facility isk)	Acquisition of building rad of Section II D complete II F)		

D.	□ Drainage/Stormwater Management □ Sewer Extension □ Road/Bridge/Seawall/Dam □ Utilities (electric, natural gas, other) □ Utilities (water, sewer) □ Planning/Education/Information Management (complete Section II G & H) □ Planning □ Community or staff preparedness education □ Information system development or improvement Other (complete all Section II questions that apply) (specify) -
υ.	<b>Describe your proposed project:</b> What type of mitigation is being proposed? What has happened to the facility that has caused mitigation to be considered? Describe what would be done to mitigate the problem to prevent recurrence? Have any studies been conducted? Why is the proposed project the best approach to solve the problem? ( <i>Type in the gray box. There is no text limit.</i> )
Е.	<ol> <li>What would this mitigation proposal cost?         \$     </li> <li>Are there project benefits that have no obvious monetary value?         Yes         No         Unknown         If yes, please describe:     </li> <li>Most grants require some type of cash or in-kind match. FEMA's Hazard Mitigation Grant Program requires a 25% match. Do you have match funds identified?         Yes         No         Unknown         If yes, please describe:     </li> </ol>
F.	Planning: Mitigation project proposals should be consistent with comprehensive land use elements, transportation, environmental, flood zone, historical, and other long-range plans.  1. Is the project consistent with the jurisdiction's comprehensive land use plan and zoning activities?  ☐ Yes ☐ No ☐ Unknown  If yes, specify issues:  2. Does the project involve transportation issues that may involve city, county, state, or MPO plans?  ☐ Yes ☐ No ☐ Unknown  If yes, explains:  3. Does the project involve issues on a coastal barrier island or coastal high hazard area?  ☐ Yes ☐ No ☐ Unknown  If yes, specify issues:

		4. Does the project involve issues in a flood or storm surge zone?  Yes Unknown	
		If yes, specify issues:  5. Would the project involve issues relating to an archaeological or historical structures, sites, event, etc.; or is the structure in an historical district?  Yes No Unknown If yes, specify issues:	
		6. Describe any other planning issues:	
II.	Vulr	nerability Assessment & Scoring	
This section allows staff to score projects based upon their vulnerability and value to accomplishing overall mitigation. The LMS Committee weighs the value of this score in determining recommendations for ranking on the initiatives/priorities list.			
	<b>A.</b>	Historical Issues: If the project is an historical building/site, when the project is complete will it be better protected from losing its historical qualities?  Yes No Not applicable Unknown	
	В.	<b>Criticality:</b> How critical is the project to the entire community (for public safety, health, economic, environment, or other reasons. Does not apply to private homes)?	
	1.	How long can this facility be inoperable?  Must not lose operational capacity at any time  Must be operational in 0 to 24 hours  Must be operational in 24 to 72 hours  Does not have to be operational within 72 hours  Not applicable	
	2.	Is the facility critical/vital to maintaining communications with emergency responders/post-disaster recovery/human need operations?  Yes No Not applicable If yes, please describe how:	
	3.	Does the project mitigate a health or safety issue in the community?  Yes  No  Not applicable	
	4.	Does the project build or protect a road or bridge that is critical for evacuation or response?  Yes No Not applicable	
	5.	Does the project enhance or expand the county's capacity to provide adequate shelter that meets State standards?  Yes No Not applicable	
	C.	<b>Natural Hazards Assessment:</b> Provide information about the facility or location's vulnerability to the following natural hazards.	

1.	Wind - Hurricane/Severe Storm/Tornado (check only one)  Vulnerable to Cat 4 or Cat 5 winds or severe events only  Vulnerable to Cat 2 or Cat 3 winds or moderate events only  Vulnerable to Cat 1 or lower winds or mild events only  Not vulnerable  Don't know
2.	Coastal Surge - Hurricane or Gulf Storm (check only one)  ☐ Vulnerable to Cat 4 or Cat 5 surge or severe events only ☐ Vulnerable to Cat 2 or Cat 3 surge or moderate events only ☐ Vulnerable to Cat 1 or lower surge or mild events only ☐ Not vulnerable ☐ Don't know
3.	Flooding – all other sources _(check only one)  Zone X, does not flood, or not vulnerable  Zone X, but known to flood  Zone B's (500 year floodplain)  Zone A's (100 year floodplain)  Zone V, Zone A Floodway, and/or documented repetitive loss  Don't know
	Origin of Flooding (for reference only – check all that apply)  Dam Failure Parking Lot/Sheetflow/Adjacent Land Runoff Retention Pond/Ditch Overflow Riverine/Creek Don't Know
4.	Other Natural Risks (check all that apply)  Wild Fires Lightning Drought Erosion Freeze/Ice/Winter Storm
D.	<b>Technology Hazards/Homeland Security Assessment:</b> Provide information about the facility's vulnerability to the following technology hazards.
1.	Hazardous Materials Release/Accident (check only one)  High vulnerability  Moderate vulnerability  Low vulnerability  Not vulnerable  Don't know  Source(s) of hazmat vulnerability (please specify)

2.	Technological/Computer Attack (check only one)  High vulnerability  Moderate vulnerability  Low vulnerability  Not vulnerable  Don't know
3.	Terrorism/Vandalism (check only one)  ☐ High possibility of terrorist/vandal interest ☐ Moderate possibility of terrorist/vandal interest ☐ Slight possibility of terrorist/vandal interest ☐ Not vulnerable ☐ Don't know
4.	Utilities Failure (check all that apply)  Electricity Gas Water Sewer/Septic system Don't know
Е.	Access Assessment: What issues exist that relate to accessing the facility or otherwise blocking its access prior to and/or following a disaster?  Not access inhibited  Electrical lines  Trees/Debris  Flooding  Sand/Mud/Soils  Vehicular Traffic  Bridge/road failure  Other (specify  Don't know
F.	<b>Private Homes:</b> Please answer the following questions concerning your request for assistance in hardening, elevating or acquisition of your home.
1.	Provide dates and/or names of storms that caused wind or flooding damage to your property. Specify whether wind or flooding or both and the height of flood waters in your home and in your yard. (Documentation will be required should this project be prioritized and chosen for submission as part of a grant).
2.	Is your home now more than 50% damaged?
3.	This grant would only pay for elevation or roof/window hardening at 75% of the actual cost. Would you have the funds to pay the remaining 25%?  Yes  No
G.	Planning/Education/Information Management Projects: Please answer the following questions concerning your project.

1.	What is the geographic area that your project covers? (check only one)
	Countywide
	Two or more jurisdictions within the County
	One jurisdiction within the County
2.	What is the expected outcome? (check only one)
	An improved planning process
	An improved community response
	Improved decision-making during or after an event
	Updated LMS Plan
	An improved system response (service providers)
	Other
	Other
3.	How will success be measured? (check only one)
٠.	Development of an evaluation component
	An exercise evaluation
	One or more specific deliverables (i.e., a completed plan, a new facility)
	Other:
	☐ Don't Know
**	
H.	<b>Final Comments:</b> Please provide any further comments on the initiative

proposal here. There is no limit to the amount of comment that can be provided

#### **How to File and Submit:**

in the gray box.

<u>Filing</u>: Save this file under a new name in your computer. Save a copy of your master file (your original file copy of this form) for future nominations.

<u>Submittal</u>: Send a copy of each completed nomination form to LMS Planning Support Staff via one of the following means:

Questions - (850) 983-1848 Fax - (850) 983-1944

E-mail – sharonm@co.santa-rosa.fl.us

Postal Mail - Sharon Marsh, Special Projects/Grants Coordinator

Santa Rosa LMS Planning Support Staff

Santa Rosa County

6495 Caroline St, Suite H

Milton, FL 32570

Thank you for your time and dedication to making Santa Rosa County and the Cities of Gulf Breeze, Jay and Milton more secure and hazard resistant communities.